


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 APR 24 AM 9:01

DOCUMENT # A95000001432			
1. Entity Name CB TANK FARM, LTD.			
Principal Place of Business 1975 WEST STATE ROAD 426 OVIDO, FL 32765		Mailing Address P.O. BOX 620257 OVIDO, FL 32762-0257	
2. Principal Place of Business 1200 Duda Trail		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Oviedo, FL		City & State	
Zip 32765	Country US	Zip	Country
6. Name and Address of Current Registered Agent CHAPMAN, TRACY DUDA 1200 DUDA TRAIL OVIDO, FL 32765		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable			
FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # 583341	NAME SOUTHLAND PRODUCE SALES OF FLORIDA, INC.	STREET ADDRESS	
STREET ADDRESS 1200 DUDA TRAIL		CITY-ST-ZIP	
CITY-ST-ZIP OVIDO, FL 32765			
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CITY-ST-ZIP			
14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes			
SIGNATURE: <u>David J. Duda</u>		Date: <u>04/12/06</u> Daytime Phone #: <u>407-365-2111</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date Daytime Phone #	
David J. Duda			

STAPLE CHECK HERE

[Handwritten initials]



04062006 Chg-LP CR2E003 (11/05)
 4. FEI Number 59-3341975 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

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